14031234647

STATEMENT OF **ORGANIZATION**

RECEIVED-

2014 MAY 14 AM 8: 24

FURINI I							FEC MAIL CENTER
1. NAME OF COMMITTEE (in	ı full)		Check if name changed)		nple:If typing, type the lines.	12FE4M5	
CSL Behri	ng Er	nploye	es Politic	cal Ac	tion Comm	nittee	
					<u> </u>	<u> </u>	
ADDRESS (number a	and street)	1020) First Av	⁄enue			
(Check if address is changed)		King	of Pruss	sia		PA	19406 -0901
				CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	AIL ADDR	ESS (Please	provide only one	e-mail add	ress)		
(Check if is changed	address	cslb	ehringep	ac@o	slbehring.	com	
	ed) ·	· L					
COMMITTEE'S WEE	B PAGE A	DDRESS (UI	RL)				·
(Check if is change		للل					
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2. DATE 05	<u> </u>	<u> </u>	014				
3. FEC IDENTIFICATION NUMBER C 00422501							
4. IS THIS STATE	MENT [NEW	(N) OR	X	AMENDED (A)		
I certify that I have	examined	this Stateme	ent and to the be	est of my k	nowledge and belief	it is true, correc	t and complete.
Type or Print Name	of Treasu	rer Pat	rick Colli	ns	**************************************		
Signature of Treasur	er (Patri	t Colle	~		Date Ö	01° / 2014.
NOTE: Submission of	false, erro				ect the person signing		o the penalties of 2 U.S.C. §437g.
Office Use				ł	For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)